## REST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09725683

		CLAIMS AS	Column (Column					SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS							r	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00		BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			6 minus 20=		. 0		-					
					. 0		L	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS  MULTIPLE DEPENDENT CLAIM PI			7 minus 3 =					X40=		ĢR	X80=	i
MOLTIFLE DEPENDENT CLAIM P			JESEINI					+135=		OR	+270=	1
* If the difference in column 1 is			less than zero, enter "0" in			olumn 2	L	TOTAL	jar	OR	TOTAL /	
	C	LAIMS AS A	MENDED - PART II								OTHER	THAN
· .		(Column 1) CLAIMS		(Colui		(Column 3)		SMALL		OR	SMALL	, ,
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=	
· ·				·		<i>*</i> -	L	TOTAL		OR	TOTAL	
		(Oaluman 4)		<b>(0</b> -1	0\	(Oaluma 6)	A	DDIT. FEE		OR	ADDIT. FÉE	
		(Column 1) CLAIMS		(Colu	IEST	(Column 3)	ır		`ADDI-	<i>;</i>		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE	-	RATE	TIONAL FEE
	Total	*	Minus	**		=.		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	.  -	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405			070	
				•			L	+135= TOTAL		OR	+270= TOTAL	
							Αl	DDIT. FEE		OR	ADDIT FEE	
		(Column 1) CLAIMS		(Colu		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	╽┞	X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7.10-		OR	7.00-	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	nber Previously Pa	id For" (Total o	r Independ	lent) is the	and, enter 3. e highest numbe	er foun	d in the app	oropriate box	k in co	iumn 1.	